



APPLICATION FORM FOR SCHOOL BUS / BUS CANCELLATION / STOP CHANGE

(One month notice required for implementation)

Date:

GR No.	Name of the Student	Class & Sec.	Present Bus Stop	Bus No.

Required New Bus Stop: Bus No:

UNDERTAKING

Even if there is no seat vacant in this bus, my ward/s will adjust with other children without troubling them and also if my ward/s involve in any kind of indiscipline activities in connection with the school transportation, the school can discontinue this facility without any notice to me.

Name of the Parent: Membership ID:

New Address: Flat/Villa No. Bldg. No. Road No: Block No: Area:

Tel. Nos: / Signature of the Parent:

FOR OFFICE USE

Approved/Allotted W E F: Signature with Date:

SUBMITTED TO THE PRINCIPAL

Sir

The parent requested Bus No. Is totally full. Requesting your kind advice.

(Dept. of Transport)